## BEST AVAILABLE COPY

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			118				Γ	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			/36 minus 20=		• 1/6			X\$ 9=		OR	X\$18=	?C&&	
INDEPENDENT CLAIMS			// minus 3 =		. 8			X40=		OR	X80=	640.	
MULTIPLE DEPENDENT CLAIM PI			RESENT	٠.				+135=		OR	+270=	2701-	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	370	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							SMALL ENTITY OF			OTHER THAN OR SMALL ENTITY			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	JLTIPLE DE	PENDEN	CLAIM		<b>ا</b> ا	+135=	24. V	OR	+270=		
								TOTAL ADDIT, FEE	_ 1		TOTAL ADDIT, FEE	•	
		(Column 1)		(Colu	mn 2)	(Column 3)	_	NDDII. FEE		,	ADDII.1 LL	* *	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	+++	F CL AIN	-		X40=	·	OR	X80=		
L	FIRST PRESE	NTATION OF M	JETIPLE DE	PENDEN	CLAIM		<b>,</b> [	+135=	-	OR	+270=		
						<b>1</b> • =	L	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE		
	•	(Column 1)		(Colu		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	٠	RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	11	X\$ 9=	ا مو	OR	X\$18=	<i>i</i>	
	Independent	*	Minus	***		=	11	X40=		OR	X80=		
L	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDEN	CLAIN		┪┖	+135=		OR	+270=		
* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													